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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/729,598	
	Filing Date	December 5, 2003	
	First Named Inventor	David R. Anderson	
	Art Unit	1625	
	Examiner Name	Charanjit Aulakh	
Total Number of Pages in This Submission	11	Attorney Docket Number	027500A/USA; Pfizer Ref: 01115/2/US (6764-000166/US)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Statement Under 37 CFR 3.73(b) Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	James E. Davis
		Reg. No.	47,516
Signature			
Date	February 8, 2005		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	James E. Davis	Express Mail Label No.	EV 327050919 US
Signature		Date	February 8, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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EV 327050919 US



Attorney Docket No. 027500A/USA
Pfizer Docket No.01115/2/US
HDP Docket No. 6794-000166/US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: David R. Anderson, et al.
Patent No: N/A
Application No: 10/729,598
Filed: 12/05/2003
Title: Tricyclic aminocyanopyridine inhibitors of mitogen activated protein kinase-activated protein kinase-2
Group Art Unit: 1625
Confirmation No: 1565
Examiner: Charanjit Aulakh
Attorney Ref: 027500A/USA
Pfizer Ref: 01115/2/US
HDP Ref: 6794-000166/US

**REVOCATION OF POWER OF ATTORNEY,
SUBSTITUTE POWER OF ATTORNEY AND
CHANGE OF CORRESPONDENCE ADDRESS**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

The Assignee of the above-identified patent application or issued patent, Pharmacia Corporation, having a business office at 700 Chesterfield Parkway West, Global Patent Department, Chesterfield, Missouri 63017-1732, hereby revokes any and all previous powers of attorney for the above-identified patent application or issued patent, and hereby appoints the attorneys and patent agents associated with Customer Number 47376 with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith with full power of substitution and revocation, to prosecute this application and any provisionals, continuations, continuations-in-part, divisionals, appeals, reissues, substitutions and extensions thereof and to transact all business in the Patent and Trademark Office connected therewith.

EV 327050919 US

Revocation of Power of Attorney
Substitute Power of Attorney and
Change of Correspondence Address



Attorney Docket No. 027500A/USA
Pfizer Docket No. 01115/2/US
HDP Docket No. 6794-000166/US

All correspondence and telephone calls concerning the above-referenced application should be directed to the Applicant's attorney at the following address:

James E. Davis, PTO Reg. No. 47,516
Harness, Dickey & Pierce, P.L.C.
7700 Bonhomme, Suite 400
Clayton, Missouri 63105
(314) 726-7500 (general tel)
(314) 446-7683 (direct tel)
(314) 726-7501 (fax)

The undersigned (whose title is supplied below) is empowered to sign this Revocation and Substitute Power of Attorney on behalf of the Assignee.

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1/31/05
Date

Respectfully submitted,

Signature

Grover F. Fuller, Jr.

Typed or printed name

Assistant Secretary

Title

Certificate of Mailing Under 37 C.F.R. 1.8

I hereby certify that this is being deposited in the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on Feb. 8, 2005, ~~2004~~.



STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: David R. Anderson, et al.

Application No./Patent No.: 10/729,598 Filed/Issue Date: 12/05/2003

Entitled: Tricyclic aminocyanopyridine inhibitors of mitogen activated protein kinase-activated protein kinase-2

Pharmacia Corporation, a Corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- 1. ☒ the assignee of the entire right, title, and interest; or
 - 2. ☐ an assignee of less than the entire right, title, and interest
- The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

Grover F. Fuller, Jr.

Printed or Typed Name

Assistant Secretary

Title

1/31/05
Date
212-573-1390
Telephone Number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Ev 3270509 + 9 US

ASSIGNMENT

WHEREAS, I/WE, the undersigned, have made certain invention or inventions which are disclosed in patent application(s) and/or provisional patent application(s) entitled:

TRICYCLIC AMINOCYANOPYRIDINE INHIBITORS OF MITOGEN ACTIVATED PROTEIN KINASE-ACTIVATED PROTEIN KINASE-2

The specification of which was filed as a Provisional Application on December 12, 2002 and given Serial Number 60/432,844.

WHEREAS, PHARMACIA CORPORATION, having its address at 800 North Lindbergh Blvd., St. Louis, Missouri, 63167, U.S.A., a business organized under the laws of the State of Delaware, is desirous of acquiring the entire right, title and interest in and to said invention or inventions and any and all patents to be obtained therefor;

NOW, THEREFORE, FOR GOOD AND VALUABLE CONSIDERATION, the receipt of which is hereby acknowledged, I/WE do hereby sell, assign and transfer to said PHARMACIA CORPORATION, its successors and assigns, the entire right, title and interest in and to said invention or inventions, in any form or embodiment thereof, and in and to said application(s); and in and to any and all applications filed in any country based thereon, including the right to file application in countries other than the country of priority filing under the provisions of any international convention; also in and to any and all improvements on said invention or inventions now or hereafter made by me/us as employee(s), agent(s) or contractor(s) of said PHARMACIA CORPORATION, also the entire right, title and interest in and to any and all patents, including reissues and extensions thereof, to be obtained in any country upon said invention, inventions or improvements, and any and all continuing applications, including divisional, continuation and continuation-in-part applications, substitute applications, and applications claiming benefit of an earlier filed provisional application, which may be filed upon said invention, inventions or improvements in any country; and

I/WE hereby authorize and request the issuing authority to issue any and all patents on said application or applications to said PHARMACIA CORPORATION, as assignee of the entire interest.

I/WE further agree, without any payment by PHARMACIA CORPORATION, other than in reimbursement of reasonable expenses I/we may incur, to communicate to said PHARMACIA CORPORATION, its representatives or agents, any facts relating to said invention, inventions or improvements, including evidence for purposes of interference, opposition or other legal proceedings, whenever requested; testify in any interference, opposition or other legal proceedings, whenever requested; and execute and deliver, on request, all lawful papers required to make any of the foregoing provisions effective.

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: David R. Anderson

Date: 12/30/02

Name: David R. Anderson

Residence: 2 Lodge Court, Lake St. Louis, MO 63367 U.S.A.

State of Missouri)

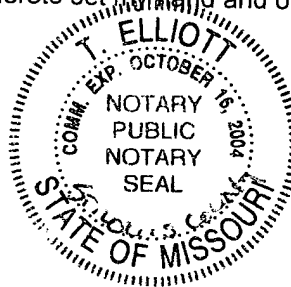
County of St. Louis)

On this 30th day of December, 2002, before me personally appeared David R. Anderson, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

[Signature]

Notary Public

My Commission expires October 16, 2004



IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: _____

Date: _____

Name: William F. Vernier

Residence: 5717 Walsh Street, St. Louis, MO 63109 U.S.A.

State of _____)

County of _____)

On this _____ day of _____, 20____, before me personally appeared William F. Vernier, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Notary Public

My Commission expires _____

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: _____

Date: _____

Name: David R. Anderson

Residence: 2 Lodge Court, Lake St. Louis, MO 63367 U.S.A.

State of Missouri)

County of St. Louis)

On this 2nd day of January, 20 03, before me personally appeared David R. Anderson, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Beverly Pennington
Notary Public

My Commission expires 8/12/06

BEVERLY PENNINGTON
NOTARY PUBLIC - STATE OF MISSOURI
MY COMMISSION EXPIRES 08/12/2006
ST. CHARLES COUNTY

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: William F. Vernier

Date: 1-2-03

Name: William F. Vernier

Residence: 5717 Walsh Street, St. Louis, MO 63109 U.S.A.

State of Missouri)

County of St. Louis)

On this 2nd day of January, 20 03 before me personally appeared William F. Vernier, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Beverly Pennington
Notary Public

My Commission expires 8/12/06

BEVERLY PENNINGTON
NOTARY PUBLIC - STATE OF MISSOURI
MY COMMISSION EXPIRES 08/12/2006
ST. CHARLES COUNTY

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: Len F. Lee

Date: Jan 31, 2003

Name: Len F. Lee

Residence: 2496 Annapolis Way, St. Charles, MO 63303 U.S.A.

State of Missouri

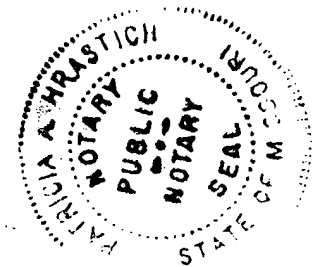
County of St Louis

On this 31 day of January, 2003, before me personally appeared Len F. Lee, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Patricia A. Hrastich
Notary Public

My Commission expires 12/17/03

PATRICIA A. HRASTICH
NOTARY PUBLIC - STATE OF MISSOURI
MY COMMISSION EXPIRES DEC. 17, 2003
ST. LOUIS COUNTY



IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: _____

Date: _____

Name: Emily J. Reinhard

Residence: 1102 Cenrose Circle, Westwood, NJ 07675 U.S.A.

State of _____

County of _____

On this _____ day of _____, 20____, before me personally appeared Emily J. Reinhard, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Notary Public

My Commission expires _____

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: _____

Date: _____

Name: Len F. Lee

Residence: 2496 Annapolis Way, St. Charles, MO 63303 U.S.A.

State of _____)

County of _____)

On this _____ day of _____, 20____, before me personally appeared Len F. Lee, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Notary Public

My Commission expires _____

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: Emily J. Reinhard

Date: 12/30/02

Name: Emily J. Reinhard

Residence: 51 John St., Ridgewood, NJ 07450 USA
~~4402 Genrose Circle, Westwood, NJ 07675 U.S.A.~~

State of New Jersey)

County of Bergen)

On this 30 day of Dec, 2002, before me personally appeared Emily J. Reinhard, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Carmella Lee Gallopo

Notary Public

My Commission expires _____

ASSIGNMENT

WHEREAS, I/WE, the undersigned, have made certain invention or inventions which are disclosed in patent application(s) and/or provisional patent application(s) entitled:

**TRICYCLIC AMINOCYANOPYRIDINE INHIBITORS OF MITOGEN ACTIVATED
PROTEIN KINASE-ACTIVATED PROTEIN KINASE-2**

The specification of which was filed as a Provisional Application on December 12, 2002 and given Serial Number 60/432,844.

WHEREAS, PHARMACIA CORPORATION, having its address at 800 North Lindbergh Blvd., St. Louis, Missouri, 63167, U.S.A., a business organized under the laws of the State of Delaware, is desirous of acquiring the entire right, title and interest in and to said invention or inventions and any and all patents to be obtained therefor;

NOW, THEREFORE, FOR GOOD AND VALUABLE CONSIDERATION, the receipt of which is hereby acknowledged, I/WE do hereby sell, assign and transfer to said PHARMACIA CORPORATION, its successors and assigns, the entire right, title and interest in and to said invention or inventions, in any form or embodiment thereof, and in and to said application(s); and in and to any and all applications filed in any country based thereon, including the right to file application in countries other than the country of priority filing under the provisions of any international convention; also in and to any and all improvements on said invention or inventions now or hereafter made by me/us as employee(s), agent(s) or contractor(s) of said PHARMACIA CORPORATION, also the entire right, title and interest in and to any and all patents, including reissues and extensions thereof, to be obtained in any country upon said invention, inventions or improvements, and any and all continuing applications, including divisional, continuation and continuation-in-part applications, substitute applications, and applications claiming benefit of an earlier filed provisional application, which may be filed upon said invention, inventions or improvements in any country; and

I/WE hereby authorize and request the issuing authority to issue any and all patents on said application or applications to said PHARMACIA CORPORATION, as assignee of the entire interest.

I/WE further agree, without any payment by PHARMACIA CORPORATION, other than in reimbursement of reasonable expenses I/we may incur, to communicate to said PHARMACIA CORPORATION, its representatives or agents, any facts relating to said invention, inventions or improvements, including evidence for purposes of interference, opposition or other legal proceedings, whenever requested; testify in any interference, opposition or other legal proceedings, whenever requested; and execute and deliver, on request, all lawful papers required to make any of the foregoing provisions effective.

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: Shridhar G. Hegde

Date: 5/14/2003

Name: Shridhar G. Hegde

Residence: 130 Holly Garden Drive, Ballwin, MO 63021

State of Missouri

County of St. Louis

On this 14th day of May, 2003, before me personally appeared Shridhar G. Hegde, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Joyce H. Krebs
Notary Public

My Commission expires 8-10-06

JOYCE H. KREBS
NOTARY PUBLIC - STATE OF MISSOURI
MY COMMISSION EXPIRES 08/10/2006
ST. LOUIS COUNTY